STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s)	Stoph	un Habb	e		
II. Name of lobbyist's	/ partnership, firm or co	rporation, if any	/ :		
ax. Italiio or ioooyist o			e American De	Acte Usional	an)
(Name	of partnership, firm or cor	poration)	c / /// Cov on		
19	Tolman Street	Shara	n MA	02067	
Business Address: (Street	et)	(Town/City)	(State)	(Zip Co	ode)
617, <u>492-4580</u> (Telephone)	ext.3457 (617)	507-9/6/ (Fax)	e-mail <u>SU</u>	abbe@ diasot	rag
	vers: (Choose one – file nsactions which are no			ou may file a separat	e report for
All reportable transa	actions occurring in the r	nonths prior to th	e reporting date relative	e to the following clier	nt:
· ·		beter Ass			
<u>OR</u>	(Full Name of Client as it a	appears on the Lobb	oyist Registration Form)		
	ctions by the lobbyist (ir lar client.	cluding the lobby	yist's family), or the lol	obying firm listed belo	w which are
IV. Date of Report	April 25, 2018 🗆		July 25, 2018	J	
-	y from date of registration	to 3/31/18	activity from 4/1/18 to 6		
a	October 31, 2018	18	January 30, 201 activity from 10/1/18 to		
	no fees received and a complete just this form an				
VI. Check if additiona	l reports are attached:				
	d fees or made expenditu	ıres, you must file	e Addendum A– Fees	and Expenses	
☐ If you have paid an Expense Reimbursemen	honorarium or reimburs nt	ed expenses, you	must file Addendum l	B-Report of Honorari	ums or
☐ If you, your firm, or	r your family has made p	oolitical contribut	ions, you must file Add	lendum C– Political (Contributions
Sworn Statement/Affin I have read RSA 15, RS and complete to the best (Signature of lobbyist) Stephen (Print Name of lobbyis)	A 15-B, RSA 14-C and to find knowledge and the Habbe	RSA 664 and her belief.	\wedge	the foregoing information of the foregoing in	TAL D
				NEW HAM DEPARTMEN	T OF STATE